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F	ill in this inf	ormation to	identify your case	and this filing:		
D	ebtor 1	Troy		Thompson		
		First Name	Middle Name	Last Name		
	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name		
			or the: EASTERN DIS	T. OF PENNSYLVANIA		
	ase number	18-11171			•	
	known)	10-11111				if this is an ded filing
						9
Of	ficial Form	106A/B				
Sc	hedule A/	B: Proper	ty			12/15
the filin	asset in the cang together, bo	ategory where y th are equally r . On the top of	ou think it fits best. E esponsible for supply any additional pages,	se as complete and accurate ing correct information. If mowerite your name and case nu	asset fits in more than one ca as possible. If two married po ore space is needed, attach a umber (if known). Answer eve Estate You Own or Have	eople are separate ery question.
	art I. De.	Scribe Lacii	ivesidence, Buildi	ig, Land, or Other Rear	LState Tod Own of Have	e an interest in
1.	•		al or equitable interes	t in any residence, building, l	and, or similar property?	
	✓ No. Go t ✓ Yes. Wh	o Part 2. ere is the prope	rty?			
2.	_			of your entries from Part 1, i	ncluding any	
		-	•	ite that number here	_	\$0.00
Р	art 2: Des	scribe Your	Vehicles			
	-		•		are registered or not? Includ Executory Contracts and Unexp.	•
					,	
3.	Cars, vans, tr	ucks, tractors,	sport utility vehicles,	motorcycles		
	✓ No ☐ Yes					
4.	•	•	•	recreational vehicles, other to the first transfer of the first tr	*	
	Yes					
5.		-	•	of your entries from Part 2, in ite that number here		\$0.00
Р	art 3: Des	scribe Your	Personal and Hous	sehold Items		
Do	you own or ha	ve any legal or	equitable interest in a	ny of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	_	oods and furnis	-	Litab anusara		
	Examples: Ma ☐ No	ајог аррпапсеs,	furniture, linens, china,	Kitchenware		
		cribe 4. Ho	usehold goods and	furnishings		\$1,500.00

Official Form 106A/B Schedule A/B: Property page 1

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Deb	tor 1	Troy Thompson	Case number (if known)	18-11171
7.	Electroi Example	nics es: Televisions and radios; audio, video, stereo, and digital equipment; comusic collections; electronic devices including cell phones, cameras,		;
	✓ No ☐ Yes	. Describe		
8.		bles of value es: Antiques and figurines; paintings, prints, or other artwork; books, pictu stamp, coin, or baseball card collections; other collections, memorabil	•	
	✓ No ☐ Yes	. Describe		
9.		ent for sports and hobbies es: Sports, photographic, exercise, and other hobby equipment; bicycles, canoes and kayaks; carpentry tools; musical instruments	pool tables, golf clubs, skis;	
	✓ No ☐ Yes	. Describe		
10.		ses: Pistols, rifles, shotguns, ammunition, and related equipment		
	✓ No ☐ Yes	. Describe		
11.	Clothes Example	es: Everyday clothes, furs, leather coats, designer wear, shoes, accessor	ies	
	☐ No ✓ Yes	Describe 6. Wearing apparel		\$500.00
12.	Jewelry Example	es: Everyday jewelry, costume jewelry, engagement rings, wedding rings, gold, silver	heirloom jewelry, watches, ç	gems,
	✓ No ☐ Yes	. Describe		
13.		m animals es: Dogs, cats, birds, horses		
	✓ No ☐ Yes	. Describe		
14.	Any oth did not	er personal and household items you did not already list, including a list	ny health aids you	
	_	. Give specific mation		
15.		dollar value of all of your entries from Part 3, including any entries for Part 3. Write the number here		→ \$2,000.00
Pá	art 4:	Describe Your Financial Assets		
Doy	ou own	or have any legal or equitable interest in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Example	es: Money you have in your wallet, in your home, in a safe deposit box, ar petition	nd on hand when you file you	ır
	✓ No ☐ Yes		Cash:	

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Debt	tor 1 Troy Thompson	1	Case number (if known)	18-11171
17.		ses, and other similar institu	unts; certificates of deposit; shares in credit unions, tions. If you have multiple accounts with the same	
	No			
	Yes	Institution name	9:	
	17.1. Checking acc	ount: Checking acc	count wells fargo	\$500.00
	17.2. Savings accord	unt: Savings acco	ount wells fargo	\$420.00
18.			kerage firms, money market accounts	
	☐ No ✓ Yes	Institution or issuer name	:	
	_	50% Stock Owner in 0 which owns	Garibaldi Property Management Construction,	LLC
		2634 S. Daggett Stree (BOA FMV \$83693),	t	
		6212 Hazel Street (B	OA FMV \$77966), and 6724	
		Trinity Street (BOA F	MV \$88490).	
		VALUE IS HALF OF E	QUITY IN REAL ESTATE	\$83,475.00
19.		-	rated and unincorporated businesses, including	
	an interest in an LLC, part No	tnership, and joint ventur	e	
	Yes. Give specific			
	information about them	Name of entity:	% of owner	rship:
20.	Government and corporat Negotiable instruments incl	te bonds and other negoti lude personal checks, cash	iable and non-negotiable instruments iters' checks, promissory notes, and money orders. sfer to someone by signing or delivering them.	
	✓ No Yes. Give specific information about them	Issuer name:		
21.	Retirement or pension acc Examples: Interests in IRA profit-sharing pl	, ERISA, Keogh, 401(k), 40	03(b), thrift savings accounts, or other pension or	
	✓ No Yes. List each account separately.	Type of account: Inst	itution name:	
22.		eposits you have made so t	hat you may continue service or use from a company ublic utilities (electric, gas, water), telecommunications	3
	No			
22	Yes		on name or individual: of money to you, either for life or for a number of year	e)
۷.	☑ No			<i>ા</i>
	☐ Yes	Issuer name and descript	ion:	

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Deb	tor 1 Troy Thompson	Case number (if known) 18-11171				
24.	Interests in an education IRA, in an account in a qualified ABLE 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	E program, or under a qualified state tuition pro	ogram.			
	✓ No					
	Yes Institution name and description. Sepa	arately file the records of any interests. 11 U.S.C.	§ 521(c)			
25.	Trusts, equitable or future interests in property (other than any powers exercisable for your benefit	rthing listed in line 1), and rights or				
	☑ No					
	Yes. Give specific information about them					
26.	Patents, copyrights, trademarks, trade secrets, and other intell <i>Examples</i> : Internet domain names, websites, proceeds from royalt	• • • •				
	No No					
	Yes. Give specific information about them					
27.	Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative associated associat	ciation holdings, liquor licenses, professional licen	ses			
	⋈ No	3., [
	Yes. Give specific information about them					
Mor	ney or property owed to you?		Current value of the			
			portion you own? Do not deduct secured claims or exemptions.			
28.	Tax refunds owed to you					
	☑ No					
	Yes. Give specific information about them, including whether	Federal	:			
	you already filed the returns	State:				
	and the tax years	Local:				
29.	Family support					
	Examples: Past due or lump sum alimony, spousal support, child s	support, maintenance, divorce settlement, property	y settlement			
	No N	Alimony:				
	Yes. Give specific information	,				
		Maintenance:				
		Support:				
		Divorce settlement:				
		Property settlement	::			
30.	Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability compensation, Social Security benefits; unpaid loans you					
	✓ No✓ Yes. Give specific information					
31.	Interests in insurance policies Examples: Health, disability, or life insurance; health savings acco	ount (HSA); credit, homeowner's, or renter's insura	nce			
	✓ No Yes. Name the insurance company of each policy					
	and list its value Company name:	Beneficiary: Su	rrender or refund value:			

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Deb	Troy Thompson	Case number (if known)18-11171	
32.	Any interest in property that is due you from someone who has d If you are the beneficiary of a living trust, expect proceeds from a life entitled to receive property because someone has died		
	✓ No✓ Yes. Give specific information		
33.	Claims against third parties, whether or not you have filed a laws <i>Examples:</i> Accidents, employment disputes, insurance claims, or rigit	* *	
	✓ No ☐ Yes. Describe each claim		
34.	Other contingent and unliquidated claims of every nature, including rights to set off claims	ng counterclaims of the debtor and	
	✓ No ☐ Yes. Describe each claim		
35.	Any financial assets you did not already list		
	✓ No☐ Yes. Give specific information		
36.	Add the dollar value of all of your entries from Part 4, including a attached for Part 4. Write that number here		395.00
			- · · ·
Г	Trt 5: Describe Any Business-Related Property You C	will of Have all litterest iii. List ally real estate iii	Part I
37.	Do you own or have any legal or equitable interest in any busines	ss-related property?	
	No. Go to Part 6.		
	Yes. Go to line 38.		
		Current value of portion you ow Do not deduct so claims or exemp	rn? ecured
38.	Accounts receivable or commissions you already earned	·	
	✓ No ☐ Yes. Describe		
39.	Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, desks, chairs, electronic devices	copiers, fax machines, rugs, telephones,	
	✓ No ☐ Yes. Describe		
40.	Machinery, fixtures, equipment, supplies you use in business, an	d tools of your trade	
	✓ No ☐ Yes. Describe		
41.	Inventory		
	✓ No ☐ Yes. Describe		
42.	Interests in partnerships or joint ventures		
	✓ No ✓ Yes. Describe Name of entity:	% of ownership:	

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Deb	tor 1	Troy Thompson	Case number (if known)	18-11171
43.	Custon	ner lists, mailing lists, or other compilations		
	✓ No ☐ Yes	. Do your lists include personally identifiable information (as defin No Yes. Describe	ned in 11 U.S.C. § 101(41A))?	
44.	Any bu	siness-related property you did not already list		
	✓ No	. Give specific information.		
45.		dollar value of all of your entries from Part 5, including any entried of or Part 5. Write that number here		→ \$0.00
Pa		Describe Any Farm- and Commercial Fishing-Related I If you own or have an interest in farmland, list it in Part 1.	Property You Own or Hav	ve an Interest In.
46.	Do you	own or have any legal or equitable interest in any farm- or comme	rcial fishing-related property?	
		Go to Part 7. Go to line 47.		
				Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm a Example No Yes	es: Livestock, poultry, farm-raised fish		
48.	Crops-	either growing or harvested		
		. Give specific rmation		
49.	Farm a	nd fishing equipment, implements, machinery, fixtures, and tools o	f trade	
	✓ No ☐ Yes			
50.	Farm a	nd fishing supplies, chemicals, and feed		
	✓ No ☐ Yes			
51.	Any far	m- and commercial fishing-related property you did not already list	t	
	_	. Give specific rmation		
52.	Add the attache	dollar value of all of your entries from Part 6, including any entries d for Part 6. Write that number here	s for pages you have	→ \$0.00
Pa	art 7:	Describe All Property You Own or Have an Interest in	That You Did Not List Abo	ove
53.	-	have other property of any kind you did not already list? es: Season tickets, country club membership		
	☑ No	. Give specific information.		

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Debtor 1	Troy Thompson	Case nu	umber (if known)18	3-11171
	ne dollar value of all of your entries from Part 7. Write the List the Totals of Each Part of this Form	hat number here	-	\$0.00
55. Part 1	: Total real estate, line 2		=	\$0.00
56. Part 2	: Total vehicles, line 5	\$0.00		
57. Part 3	: Total personal and household items, line 15	\$2,000.00		
58. Part 4	: Total financial assets, line 36	\$84,395.00		
59. Part 5	: Total business-related property, line 45	\$0.00		
60. Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61. Part 7	: Total other property not listed, line 54	+\$0.00		
62. Total	personal property. Add lines 56 through 61	\$86,395.00	Copy personal property total	+ \$86,395.00
63. Total	of all property on Schedule A/B. Add line 55 + line 62			\$86,395.00

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Fill in this inf	ormation to ider	ntify your c	ase:				
Debtor 1	Troy		Thompso	on			
	First Name	Middle Name					
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
		e: EASTERN	I DIST. OF PENNS	YLV	ANIA	Check if this is an	
Case number (if known)	18-11171					Check if this is an amended filing	
Official Form	106C						
Schedule C:	The Property	y You Cla	aim as Exemp	ot		04/	16
Using the property space is needed, fi	you listed on <i>Schedu</i>	ule A/B: Prope iis page as m	erty (Official Form 10	6A/B)	as your source, list th	esponsible for supplying correct information to property that you claim as exempt. If mosessary. On the top of any additional pages	ore
is to state a specific exempted up to the receive certain be exemption of 100% property is determined.	fic dollar amount as e amount of any ap nefits, and tax-exen % of fair market valu nined to exceed that	exempt. Alt plicable statu npt retirement ne under a law t amount, you	ernatively, you may utory limit. Some ex it fundsmay be unl w that limits the exe ur exemption would	claii emp imite mpti	n the full fair market tionssuch as those d in dollar amount. I	you claim. One way of doing so value of the property being for health aids, rights to However, if you claim an lar amount and the value of the le statutory amount.	
Part 1: Ide	ntify the Proper	ty You Cla	im as Exempt				
1. Which set of	exemptions are you	claiming?	Check one only,	even	if your spouse is filing	with you.	
	claiming state and fed claiming federal exen		ruptcy exemptions. .S.C. § 522(b)(2)	11 U	S.C. § 522(b)(3)		
2. For any prop	erty you list on Sch	edule A/B tha	at you claim as exer	npt, f	ill in the information	below.	
-	of the property and lists this property		Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption	
			Copy the value from Schedule A/B		eck only one box for h exemption		
Brief description:			\$1,500.00	$\overline{\mathbf{Q}}$	\$1,500.00	11 U.S.C. § 522(d)(3)	
4. Household ge	oods and furnishi	ngs			100% of fair market	- ,,,,	
Line from Schedule	e A/B: 6				value, up to any applicable statutory limit		
Brief description:			\$500.00	$\overline{\mathbf{A}}$	\$500.00	11 U.S.C. § 522(d)(3)	
6. Wearing appa Line from <i>Schedule</i>					100% of fair market value, up to any applicable statutory limit		
(Subject to ad	justment on 4/01/19	and every 3 y		es fi	ed on or after the date 215 days before you f		

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Debtor 1	Troy Thompson			Case number	r (if known)
Part 2:	Additional Page				
	ription of the property and line on A/B that lists this property	Current value of the portion you own	ne portion you exemption you claim		Specific laws that allow exemption
		Copy the value from Schedule A/B		eck only one box for h exemption	
_	iption: y account wells fargo Schedule A/B:17.1	\$500.00		\$500.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
_	iption: account wells fargo Schedule A/B:17.2	\$420.00		\$420.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Managemowns 2634 S. D (BOA FM)	k Owner in Garibaldi Property nent Construction, LLC which raggett Street V \$83693),	\$83,475.00		\$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
6212 Ha	zel Street (BOA FMV \$77966), and				
Trinity St	reet (BOA FMV \$88490).				
	S HALF OF EQUITY IN REAL ESTAT Schedule A/B:18	E			

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Fill in this inf	ormation to ident	ify your occo				
	ormation to ident	iry your case.	Thomas			
Debtor 1	Troy First Name	Middle Name	Thompson Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
		EASTEDN DIST	CE DENNEYI VAN			
		EASTERN DIST	T. OF PENNSYLVAN	IA		
Case number (if known)	<u>18-11171</u>				Check if this is amended filing	
Official Form	106D					
Schedule D:	Creditors Wh	o Have Clai	ms Secured by	Property		12/15
1. Do any credit No. Chee Yes. Fill Part 1: Lis 2. List all secure claim, list the correditor has a	No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims List All Secured Claims List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Column B Value of collateral that supports this portion					
2.1		Describe the secures the c		\$14,000.00	\$83,475.00	\$13,723.45
City of Philadelp Creditor's name Bankruptcy Unit Number Street 15th Floor		_	Owner in Garibaldi			
1515 Arch Stree	t		you file, the claim is:	Check all that apply.		
Philadelphai City	PA 19102 State ZIP Code	Contingen Unliquidat				
Debtor 1 only Debtor 2 only Debtor 1 and D At least one of Check if this c	Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other (including a right to offset) Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)					
to a communit	-	Last 4 digits o	of account number			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$14,000.00

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Debtor 1	Troy Thompson	Case number (if known) _ 18-11171			
Part 1:	Additional Page After listing any entries on sequentially from the previous		Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
Debtor 1 Debtor 2 Debtor 1 Debtor 1 At least 6 Check if	e y Unit eet Boulevard ia PA 19102 State ZIP Code he debt? Check one. only	Describe the property that secures the claim: 2634 S. Daggett Street As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, med) Judgment lien from a lawsuit Other (including a right to offset) Real Estate Taxes Arrears	mortgage or secured	\$0.00	\$1,187.00
Date debt w	-	Last 4 digits of account number	0 1 9 5		
Number Str	e Unit/Bankruptcy Dept.	Describe the property that secures the claim: 50% Stock Owner in Garibaldi Property Management C As of the date you file, the claim is:	\$17,503.00 Check all that apply.	\$0.00	\$17,503.00
Debtor 1 Debtor 2 Debtor 1 Debtor 1 At least 6 Check if	State ZIP Code he debt? Check one. only only and Debtor 2 only one of the debtors and another f this claim relates mmunity debt	Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, mo Judgment lien from a lawsuit Other (including a right to offset) Water/Sewer Arreares		car loan)	

Add the dollar value of your entries in Column A on this page. Write that number here:

\$18,690.00

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Debtor 1 Troy Thompson		Case number (if	known) 18-11171			
Additional Page Part 1: After listing any entries on sequentially from the previous		Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any		
City of Philadelphia/Law Dept-Tax Ur Creditor's name One Parkway Building 15th Floor Number Street 1515 Arch Street	Describe the property that secures the claim: 50% Stock Owner in Garibaldi Property Management C As of the date you file, the claim is:	\$25,998.45 Check all that apply.	\$83,475.00			
Philadelphia PA 19102 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Taxes					
2.5 Pnc Mortgage Creditor's name Po Box 8703 Number Street	Last 4 digits of account number Describe the property that secures the claim: 2634 S. Daggett Street	\$57,200.00	\$83,475.00			
Dayton OH 45401 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, me Judgment lien from a lawsuit Other (including a right to offset) FHA Real Estate Mortgage	mortgage or secured	car Ioan)			
Date debt was incurred 11/2001	Last 4 digits of account number	7 2 6 1				
In ForeclosureOwned by Garibaldi F	Property Management Construction	on, LLC				

Add the dollar value of your entries in Column A on this page. Write that number here:

\$83,198.45

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Debtor 1	Troy Thompson		Case number (if known)18-11171			
Additional Page Part 1: Additional Page After listing any entries on sequentially from the previous			Amount of claim Do not deduct the Value of collateral that supports this po		Column C Unsecured portion If any	
2.6 Pnc Mortg Creditor's nam Po Box 87 Number St	ne	Describe the property that secures the claim: - 2634 S. Daggett Street	\$10,760.00	\$10,760.00		
Debtor Debtor Debtor At least Check	•	As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, multiple) Judgment lien from a lawsuit Other (including a right to offset) Arrearage claim	s mortgage or secured	car loan)		
Date debt v	vas incurred Various	Last 4 digits of account number	7 2 6 1			

Add the dollar value of your entries in Column A on this page. Write that number here:

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$10,760.00 \$126,648.45

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Fill in this information t	o identify your ca	ase:			
Debtor 1 Troy		Thompson			
First Name	Middle Name	Last Name			
Debtor 2					
(Spouse, if filing) First Name	Middle Name	Last Name			
United States Bankruptcy Cour	t for the: EASTERN	DIST. OF PENNSYLVANIA			
Case number 18-11171			_	l Obsalvitabia ia e	
(if known)			_	Check if this is a amended filing	an
Official Form 106E/F					
Schedule E/F: Credit	ors Who Have	Unsecured Claims			12/15
Do not include any creditors w If more space is needed, copy to this page. On the top of any	rith partially secured the Part you need, fil	and on Schedule G: Executory Cor claims that are listed in Schedule Il it out, number the entries in the l rite your name and case number (i secured Claims	D: Creditors Who Hooxes on the left. A	old Claims Secur	ed by Property.
1. Do any creditors have price	ority unsecured clain	ns against you?			
✓ Yes.					
claim. For each claim listed show both priority and nonp	d, identify what type of priority amounts. As m priority unsecured claim	creditor has more than one priority u claim it is. If a claim has both priori such as possible, list the claims in al ns, fill out the Continuation Page of F	ty and nonpriority am chabetical order acco	ounts, list that clain	m here and or's name. If
(For an explanation of each	type of claim, see the	e instructions for this form in the instr	ruction booklet.		
			Total claim	Priority amount	Nonpriority amount
2.1			\$3,500.00	\$3,500.00	\$0.00
Cibik and Cataldo, P.C.		Last 4 digits of account number			
Priority Creditor's Name 1500 Walnut St., Suite 900 Number Street		Last 4 digits of account number When was the debt incurred?	07/01/2015	_	
		As of the date you file, the claim	is: Check all that app	ılv.	
		Contingent	, , , , , , , , , , , , , , , , , , , ,	,	
Philadelphia PA City State	19102 e ZIP Code	Unliquidated Disputed			
Who incurred the debt? Che	ck one.	Type of PRIORITY unsecured cla	im:		
Debtor 1 only		☐ Domestic support obligations			
Debtor 2 only Debtor 1 and Debtor 2 only		Taxes and certain other debts y	•	ent	
At least one of the debtors a	nd another	Claims for death or personal in intoxicated	jury writte you were		
Check if this claim is for a	community debt	Other. Specify			
Is the claim subject to offset?		Attorney fees for this case)		
No Yes					

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Debtor 1	Troy Thompson	Case number (if known)
Part 2:	List All of Your NONPRIORIT	TY Unsecured Claims
3. Do an	y creditors have nonpriority unsecured	d claims against you?
ш.	lo. You have nothing to report in this par	t. Submit this form to the court with your other schedules.
If a cre type of	editor has more than one nonpriority unse f claim it is. Do not list claims already inc	s in the alphabetical order of the creditor who holds each claim. ecured claim, list the creditor separately for each claim. For each claim listed, identify what cluded in Part 1. If more than one creditor holds a particular claim, list the other creditors in unsecured claims, fill out the Continuation Page of Part 2.
		Total claim
4.1		\$384.00
Afni, Inc.		Last 4 digits of account number 3 7 6 0
Nonpriority C Attn: Ban	reditor's Name	When was the debt incurred? 09/2010
Number	Street	As of the date you file, the claim is: Check all that apply.
PO Box 3	097	_ Contingent
		☐ Unliquidated ☐ Disputed
Blooming	ton IL 61702	
City	State ZIP Code	Type of NONPRIORITY unsecured claim:
Who incuri ☐ Debtor	red the debt? Check one.	☐ Student loans
Debtor	•	Obligations arising out of a separation agreement or divorce
	1 and Debtor 2 only	that you did not report as priority claims
	t one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts
_	if this claim is for a community debt	
_	n subject to offset?	Collection Agency
✓ No	in subject to offset:	
☐ Yes		
Original C	reditor Name: T-MOBILE	
Collection		
4.2		\$646.00
	llections Svc	Last 4 digits of account number6297_
Nonpriority C	reditor's Name	When was the debt incurred?
Number	Street	As of the date you file, the claim is: Check all that apply.
		_ Contingent
		Unliquidated
Needham	MA 02494	Disputed
City	State ZIP Code	Type of NONPRIORITY unsecured claim:
	red the debt? Check one.	☐ Student loans
Debtor	•	Obligations arising out of a separation agreement or divorce
Debtor	•	that you did not report as priority claims
	1 and Debtor 2 only tone of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts
ш		Other. Specify
_	if this claim is for a community debt	Collection Agency
	n subject to offset?	
✓ No ☐ Yes		
	Creditor Name: 06 PROGRESSIVE I	NSURANCE COMPANY
Collection	1	

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Debtor 1 Troy Thompson	Case number (if known)18-11171	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.3		\$974.00
Diversified Consultant	Last 4 digits of account number 0 6 0 6	
Nonpriority Creditor's Name	When was the debt incurred? 04/2015	
P O Box 551268 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
	Unliquidated	
Jacksonville FL 32255	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Collection Attorney	
Is the claim subject to offset?	Collection Attorney	
No No		
Yes		
Original Creditor Name: SPRINT		
Collection		
Account Closed		
4.4		\$974.00
	Last 4 digits of account number 4 4 4 2	Ψ974.00
ERC/Enhanced Recovery Corp Nonpriority Creditor's Name	Last 4 digits of account number 1 1 1 4 3	
Attn: Bankruptcy	When was the debt incurred? 11/2016	
Number Street 8014 Bayberry Rd	As of the date you file, the claim is: Check all that apply.	
out Bayberry Ru		
	— ☐ Disputed	
JacksonvilleFL32256CityStateZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Collection Attorney	
Is the claim subject to offset?		
No Yes		
Yes		
Original Creditor Name: SPRINT Collection		
Account Closed		

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Debtor 1	Troy Thompson	Case number (if known) 18-11171	
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing previous page 4.5	any entries on this page, number the ge.	em sequentially from the	Total claim \$1,010.00
Transworld Sys Inc/09 Nonpriority Creditor's Name 507 Prudential Rd Number Street		Last 4 digits of account number 4 5 6 6 When was the debt incurred? 07/2011 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	
At least of	only	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collection Attorney	
✓ No ☐ Yes	subject to offset? editor Name: DIRECTV		

Debtor 1	Troy Thompson			Case number (if known)
Part 3:	List Others to B	e Notified Ab	out a Debt That You Already	Listed
For ex credite debts	ample, if a collection a or in Parts 1 or 2, then	gency is trying t list the collection 1 or 2, list the a	o collect from you for a debt you on a gency here. Similarly, if you had ditional creditors here. If you do	a debt that you already listed in Parts 1 or 2. by the to someone else, list the original live more than one creditor for any of the not have additional parties to be notified for
Cibik and Name	Cataldo, P.C.		On which entry in Part 1 or P	art 2 did you list the original creditor?
1500 Walr			Lineof (Check one):	Part 1: Creditors with Priority Unsecured Claims
Number Suite 900	Street		Required Notification	Part 2: Creditors with Nonpriority Unsecured Claims
Philadelpl City	hia PA State	19102 ZIP Code	—— Last 4 digits of account num	ber
City of Ph	iladelphia		On which entry in Part 1 or P	art 2 did you list the original creditor?
Name Bankrupto	cv Unit		Line of (Check one):	Part 1: Creditors with Priority Unsecured Claims
	Street		Required Notification	Part 2: Creditors with Nonpriority Unsecured Claims
1515 Arch Street				
Philadelpl		19102	Last 4 digits of account num	ber
City	State	ZIP Code		
	niladelphia		On which entry in Part 1 or P	art 2 did you list the original creditor?
Name Major Tax	Unit/Bankruptcy De	ept.	Line of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Number 1401 JFK	Street Blvd, Room 580	-	Required Notification	Part 2: Creditors with Nonpriority Unsecured Claims
Philadelpl City	hia PA State	19102 ZIP Code	— Last 4 digits of account num —	ber
Equifax			On which entry in Part 1 or P	art 2 did you list the original creditor?
Name P.O. Box	740241		Line of (Check one):	Part 1: Creditors with Priority Unsecured Claims
	Street		Required Notification	Part 2: Creditors with Nonpriority Unsecured Claims
Atlanta City	GA State	30374 ZIP Code	Last 4 digits of account num	ber
Experian			On which entry in Part 1 or P	art 2 did you list the original creditor?
Name	intenance		Line of (Check one):	Part 1: Creditors with Priority Unsecured Claims
	Street		Required Notification	Part 2: Creditors with Nonpriority Unsecured Claims
			Last 4 digits of account num	ber
Allen City	TX State	75013 ZIP Code	<u> </u>	

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Debtor 1 Troy Thom	oson			Case number (if known)
Part 3: List Othe	rs to B	e Notified Abou	ut a Debt That You Already	/ Listed Continuation Page
I.R.S.			On which entry in Part 1 or P	Part 2 did you list the original creditor?
Name P.O. Box 7346			Line of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Number Street			Required Notification	Part 2: Creditors with Nonpriority Unsecured Claims
			Last 4 digits of account num	ber
Philadelphia City	PA State	19101-7346 ZIP Code	_	
City	State	ZIP Code		
PA Dept. of Revenue			On which entry in Part 1 or P	Part 2 did you list the original creditor?
Name Bankruptcy Division			Line of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Number Street Bureau of Compliance			Required Notification	Part 2: Creditors with Nonpriority Unsecured Claims
P.O. Box 280946			_	
		47400 0040	 Last 4 digits of account num 	ber
Harrisburg City	PA State	17120-0946 ZIP Code	_	
Peco Energy Name			On which entry in Part 1 or P	Part 2 did you list the original creditor?
2301 Market Street # N	3-1		Line of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Number Street Legal Department			Required Notification	Part 2: Creditors with Nonpriority Unsecured Claims
			Last 4 digits of account num	ber
Philadelphia City	PA State	19103-1338 ZIP Code	_	
Oity	State	Zii Code		
PGW			On which entry in Part 1 or P	Part 2 did you list the original creditor?
Name Legal Dept. 4th Floor			Line of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Number Street 800 W. Montgomery Av	/enue		Required Notification	Part 2: Creditors with Nonpriority Unsecured Claims
			Last 4 digits of account num	ber
Philadelphia	PA State	19122 ZIP Code	_	
City	State	ZIF Code		
Trans Union Corporation	on		On which entry in Part 1 or P	Part 2 did you list the original creditor?
Name Public Records Depart	ment		Line of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Number Street 555 West Adams Stree	+		Required Notification	Part 2: Creditors with Nonpriority Unsecured Claims
JJJ West Adams office			_	
Chicago		00004	 Last 4 digits of account num 	ber
Chicago City	IL State	60661 ZIP Code	_	
Udren Law Offices,PC			On which entry in Part 1 or P	Part 2 did you list the original creditor?
Name 111 Woodcrest Road			Line of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Number Street Suite 200				Part 2: Creditors with Nonpriority Unsecured Claims
Juile 200			_	. ,
Charry Hill	NI I	08003	 Last 4 digits of account num 	ber <u>B</u> <u>a</u> <u>n</u> <u>k</u>
Cherry Hill City	NJ State	08003 ZIP Code	_	

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Debtor 1	Troy Thompson	Case number (if known)	18-11171	
Part 4:	Add the Amounts for Each Type of Unsecured Claim			

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims	6a.	Domestic support obligations	6a.	\$0.00
nom r art i	6b. Taxes and certain other debts you owe the government			\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. -	\$3,500.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$3,500.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. 🚽	\$3,988.00
	6j.	Total. Add lines 6f through 6i.	6j.	\$3,988.00

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Fill in this information to identify your case:						
Debtor 1	Troy	NEL III N	Thompson			
	First Name	Middle Name	Last Name			
Debtor 2	First Name	NAC-Julia Nilana	Last Mana			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: EASTERN DIST. OF PENNSYLVANIA						
Case number	18-11171				Check if this is an	
(if known)					amended filing	

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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Fill in this inf	ormation to id	entify your case	:			
Debtor 1	Troy First Name	Middle Name	Thompson Last Name	-		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	_		
United States Bar	nkruptcy Court for	the: EASTERN DIS	T. OF PENNSYLVANIA	_		
Case number (if known)	18-11171			☐ Check if this is an amended filing		
Official Form	106H					
Schedule H:	Your Code	btors			12/15	
Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.						
1. Do you have ☑ No ☐ Yes	any codebtors?	(If you are filing a jo	int case, do not list either spo	use as a codebtor.)		
2. Within the las	st 8 years, have yo	ou lived in a commu	nity property state or territo	ry? (Community property states and territories		

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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l	Fill in this inform	nation to i	dentify your case:				
	Debtor 1	Troy	APTH AL	Thompso	on		
		First Name	Middle Name	Last Name		Che	eck if this is:
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		—— —	An amended filing
	United States Bankr	uptcy Court f	for the: EASTERN D	IST. OF PENNSY	LVANI	, D	A supplement showing postpetition
	Case number	18-11171					chapter 13 income as of the following date:
	(if known)						MM / DD / YYYY
_	fficial Form 10						
S	chedule I: You	ur Incon	ne				12/15
res inc ab yo	sponsible for supply clude information ab out your spouse. If ur name and case n	ving correct bout your sp more space	information. If you are ouse. If you are separ is needed, attach a se own). Answer every o	e married and not the married and your spot parate sheet to the	iling joi use is n	ntly, and your ot filing with y	I Debtor 2), both are equally spouse is living with you, rou, do not include information any additional pages, write
1.	Fill in your emplo	yment					
	information. If you have more the	han one		Debtor 1			Debtor 2 or non-filing spouse
	job, attach a separ	ate page		✓ Employed			Employed
	with information ab additional employe			☐ Not employe	ed		☐ Not employed
			Occupation	Producer			
	Include part-time, s or self-employed w	-	Employer's name	Jabari Product	ions		
	Occupation may in student or homema applies.		Employer's address	Number Street			Number Street
				Stone Mountai		A 30083 ate Zip Code	City State Zip Code
			How long employed ti	·		,	, , , , , , , , , , , , , , , , , , , ,
	Oire D	ataila Aba					
			out Monthly Incom		ng to ro	port for any line	write CO in the appear Include your
	n-filing spouse unless			n. II you have nour	ng to rep	DOIT IOI AITY IIITE	, write \$0 in the space. Include your
-	, ,	•	e more than one employerate sheet to this form.	er, combine the info	rmation	for all employe	rs for that person on the lines below. If
					Fo	or Debtor 1	For Debtor 2 or non-filing spouse
2.			nlary, and commissions monthly, calculate what		2	\$2,046.80	
3.	Estimate and list	monthly ove	ertime pay.		3. +	\$0.00	
4.	Calculate gross in	ncome. Add	d line 2 + line 3.		4.	\$2,046.80	

Official Form 106l Schedule I: Your Income page 1

Deb	tor 1 Troy Thompson		Case nur	mber (if know	'n) 18- 1	<u>1117</u>	<u>'1 </u>
			For Debtor 1	For Debto		_	
	Copy line 4 here	4.	\$2,046.80				
5.	List all payroll deductions:						
	5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00				
	5b. Mandatory contributions for retirement plans	5b.	\$0.00				
	5c. Voluntary contributions for retirement plans	5c.	\$0.00				
	5d. Required repayments of retirement fund loans	5d.	\$0.00				
	5e. Insurance	5e.	\$0.00				
	5f. Domestic support obligations	5f.	\$0.00				
	5g. Union dues	5g.	\$0.00				
	5h. Other deductions. Specify:	5h. +	\$0.00				
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	6.	\$0.00				
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$2,046.80				
8.	List all other income regularly received:						
	 Net income from rental property and from operating a business, profession, or farm 	8a.	\$250.00				
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.						
	8b. Interest and dividends	8b.	\$0.00				
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00				
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.						
	8d. Unemployment compensation	8d.	\$0.00				
	8e. Social Security	8e.	\$0.00				
	8f. Other government assistance that you regularly receive						
	Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.						
	Specify:	8f.	\$0.00				
	8g. Pension or retirement income	 8g.	\$0.00	-			
	8h. Other monthly income. Specify:	8h. +	\$0.00				
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$250.00				
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$2,296.80	+		= [_	\$2,296.80
11.	State all other regular contributions to the expenses that you list in		le J.				
	Include contributions from an unmarried partner, members of your household, your dependents, your roommate friends or relatives.						
	Do not include any amounts already included in lines 2-10 or amounts the		. ,	expenses list		iedul •	
	Specify:				_ 11.	+ _	\$0.00
12.	Add the amount in the last column of line 10 to the amount in line 11 income. Write that amount on the Summary of Your Assets and Liabilities				12.	[.	\$2,296.80 ombined
13	if it applies. Do you expect an increase or decrease within the year after you file	this for	m?				onthly income
	□ No. None. INCOME FROM GARIBALDI WAS \$						
	Yes. Explain:	5,000 II	V 2017				

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Debtor 1	Troy Thompson		Case number (if known)	18-11171	
8a. Attache	ed Statement (Debtor 1)				
		GARIBALDI PROPERTIES			
Gross Mo	nthly Income:				\$250.00
Expense		Category	Amount	-	
Total Mon	thly Expenses				\$0.00
Net Month	ly Income:			-	\$250.00

Official Form 106l Schedule I: Your Income page 3

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Ē	ill in this inforn	nation to ident	ify your case:				.1. 26 (1.2.	•-	
	Debtor 1	Troy		Thomp	oson	l	ck if this An ame	is: ended filing	
	Debior 1	First Name	Middle Name	Last Nam		$\ \ $	A supp	ement showing	
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Nam	ne		chapter followin	· 13 expenses a g date:	s of the
		ruptcy Court for the	e: EASTERN DIST. O	F PENN	SYLVANIA		MM / D	D / YYYY	
	Case number	18-11171					IVIIVI / D	וווו/ט	
	(if known)								
	fficial Form 10								
	chedule J: Yo	<u> </u>							12/15
cor	rect information. I	f more space is n er (if known). An	ole. If two married peop eeded, attach another s swer every question.						
_		ibe Your Hous	enoid						
1.	Is this a joint cas	se?							
2.	_ No	S. Debtor 2 live in a s	separate household? ile Official Form 106J-2, E	Expenses	for Separate Housel	hold o	f Debtor	2.	
	Do not list Debtor Debtor 2.	ä	Yes. Fill out this inform for each dependent		Dependent's relation Debtor 1 or Debtor		p to	Dependent's age	Does dependent live with you? No
	Do not state the d	ependents'							Yes
	names.								Yes
									□ No - □ Yes
									☐ No
									- ☐ Yes
									□ No - □ Yes
3.	Do your expense expenses of peo yourself and you	ple other than	✓ No ☐ Yes						
P	art 2: Estima	ate Your Ongo	ing Monthly Expens	ses					
to ı		of a date after th	kruptcy filing date unle e bankruptcy is filed. If	-	-			-	
			sh government assistan n Schedule I: Your Inco					Your expens	ses
4.			enses for your residence I any rent for the ground of				2	1	\$483.47
	If not included in	line 4:							
	4a. Real estate t	axes					4	ła	\$0.00
	4b. Property, hor	meowner's, or rente	er's insurance				4	1b	\$0.00
	4c. Home mainte	enance, repair, and	l upkeep expenses				4	łc	\$50.00
	4d. Homeowner's	s association or co	ndominium dues				4	ld.	

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Deb	tor 1 Troy Thompson	Case number (if known)	18-11171
		Your e	expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a	\$178.00
	6b. Water, sewer, garbage collection	6b	\$55.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$110.00
	6d. Other. Specify:	6d.	
7.	Food and housekeeping supplies	7	\$400.00
8.	Childcare and children's education costs	8	
9.	Clothing, laundry, and dry cleaning	9.	\$125.00
10.	Personal care products and services	10	\$35.00
11.	Medical and dental expenses	11	\$50.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12	\$160.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13	\$40.00
14.	Charitable contributions and religious donations	14	\$10.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a	
	15b. Health insurance	15b.	
	15c. Vehicle insurance	15c	
	15d. Other insurance. Specify:	15d.	
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16	
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a	\$0.00
	17b. Car payments for Vehicle 2	17b	
	17c. Other. Specify:	17c	
	17d. Other. Specify:		
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18	
19.	Other payments you make to support others who do not live with you. Specify:	19	

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Debtor 1		Troy Thompson	Case number (if known)	18-11171			
20.		real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.					
	20a.	Mortgages on other property	20a				
	20b.	Real estate taxes	20b				
	20c.	Property, homeowner's, or renter's insurance	20c				
	20d.	Maintenance, repair, and upkeep expenses	20d				
	20e.	Homeowner's association or condominium dues	20e				
21.	Other	Specify:	21. +				
22.	Calcu	late your monthly expenses.	_				
	22a.	Add lines 4 through 21.	22a	\$1,696.47			
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b	_			
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$1,696.47			
23.	Calcu	late your monthly net income.					
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a	\$2,296.80			
	23b.	Copy your monthly expenses from line 22c above.	23b. _ _	\$1,696.47			
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	\$600.33			
24.	Do yo	ou expect an increase or decrease in your expenses within the year after you fil	le this form?				
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?						
	1	No.	_				
		Yes. Explain here: None.					
		Notice.					

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Fill in this inf	ormation to id	dentify your case	:		
Debtor 1	Troy		Thompson		
	First Name	Middle Name	Last Name		
Debtor 2	E:	54: 1 II - 51		_	
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for	_			
Case number	18-11171				☐ Check if t
(if known)					amended

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

P	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$86,395.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$86,395.00
P	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$126,648.45
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$3,500.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+\$3,988.00
	Your total liabilities	\$134,136.45
P	art 3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$2,296.80
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$1,696.47

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Debtor 1		Troy Thompson	Case number (if known) _ 18-11171			
Р	Part 4: Answer These Questions for Administrative and Statistica		cal Records			
6.	Are ye	ou filing for bankruptcy under Chapters 7, 11, or 13?				
	ш.	lo. You have nothing to report on this part of the form. Check this box and s 'es	ubmit this form to	the court with you	ur other schedules.	
7.	What	kind of debt do you have?				
	fa	Your debts are primarily consumer debts. Consumer debts are those "incuamily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for stati	stical purposes.	28 U.S.C. § 159.	•	
		Your debts are not primarily consumer debts. You have nothing to report on is form to the court with your other schedules.	on this part of the	form. Check this	box and submit	
8.		the Statement of Your Current Monthly Income: Copy your total current mal Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	onthly income fro	om	\$2,796.80	
9.	Сору	the following special categories of claims from Part 4, line 6 of Schedule	e <i>E/F:</i>			
			То	tal claim		
	From	Part 4 on Schedule E/F, copy the following:				
	9a. C	Comestic support obligations. (Copy line 6a.)	_	\$0.00	0	
	9b. T	axes and certain other debts you owe the government. (Copy line 6b.)		\$0.00	<u>0</u>	
	9c. C	Claims for death or personal injury while you were intoxicated. (Copy line 6c.)		\$0.00	<u>0</u>	
	9d. S	Student loans. (Copy line 6f.)	_	\$0.00	<u>0</u>	
		Obligations arising out of a separation agreement or divorce that you did not reriority claims. (Copy line 6g.)	eport as	\$0.00	<u>0</u>	
	9f. D	Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6	h.) +	\$0.00	<u>0</u>	

9g. Total. Add lines 9a through 9f.

\$0.00

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Fill in this inf	ormation to iden			
Debtor 1	Troy First Name	Middle Name	Thompson Last Name	
Debtor 2				
(Spouse, if filing)		Middle Name	Last Name	
United States Ba	nkruptcy Court for the			
Case number (if known)	18-11171			Check if this is amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is I	NOT an attorney to help you fill out bankruptcy forms?
☑ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have true and correct.	read the summary and schedules filed with this declaration and that they are
X /s/ Troy Thompson Troy Thompson, Debtor 1	XSignature of Debtor 2
Date <u>02/23/2018</u> MM / DD / YYYY	Date MM / DD / YYYY

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Fill in th	his information to	identify your case	:				
Debtor 1	Troy		Thompson				
	First Name	Middle Name	Last Name				
Debtor 2 (Spouse,	if filing) First Name	Middle Name	Last Name				
United Sta	ates Bankruptcy Court fo	or the: EASTERN DIS	T. OF PENNSYLVANIA				
Case num (if known)				Check if this is an amended filing			
Official	Form 107						
		l Affairs for Ind	lividuals Filing fo	r Bankruntev	04/16		
Otatom		i 7 mano ioi ma	irriadalo i iiilg io	- Danki aptoy	 		
correct info	ormation. If more space and case number (if k	ce is needed, attach a nown). Answer every	separate sheet to this for	er, both are equally responsible for supplying m. On the top of any additional pages, write			
☐ Ma	is your current marital arried ot married	status?					
	es. List all of the places	you lived in the last 3 y	ears. Do not include where	e you live now.			
(Comr	Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)						

Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

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Debtor 1		Troy Thompson		Case nu	mber (if known)18-1117	1	
P	art 2:	Explain the Sources of Ye	our Income				
4.	4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.						
	✓ No ☐ Yes	s. Fill in the details.					
5.	Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1.						
	List ead	ch source and the gross income from	m each source separately.	Do not include income	that you listed in line 4.		
	□ No ☑ Yes	s. Fill in the details.					
			Debtor 1		Debtor 2		
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions	Sources of income Describe below.	Gross income from each source (before deductions and exclusions	
From January 1 of the current year until the date you filed for bankruptcy:		-					
For	the last	calendar year:					
(Jar	nuary 1 to	December 31, 2017)					
		endar year before that: December 31, 2016)					

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Deb	otor 1	Troy Thompson Case number (if known) 18-11171	
Р	art 3:	List Certain Payments You Made Before You Filed for Bankruptcy	
6.	Are eith	er Debtor 1's or Debtor 2's debts primarily consumer debts?	
	□ No.	Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."	
		During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?	
		☐ No. Go to line 7.	
		Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.	
		* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.	
	√ Yes	. Debtor 1 or Debtor 2 or both have primarily consumer debts.	
		During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?	
		✓ No. Go to line 7.	
		Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.	
7.	Insiders corporat agent, in	I year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; tions of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations child support and alimony.	
	✓ No ☐ Yes	. List all payments to an insider.	
8.		l year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that ed an insider?	
	Include	payments on debts guaranteed or cosigned by an insider.	
	✓ No ☐ Yes	. List all payments that benefited an insider.	

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Debtor 1 Troy Thompson			Case number (if known) _18-11171		
Part 4:	Identify Legal Act	ions, Repossessions, and Forec	losures		
		or bankruptcy, were you a party in any la rsonal injury cases, small claims actions, tes.			
	No Yes. Fill in the details.				
Case title		Nature of the case	Court or agency	St	atus of the case
	PHILADELPHIA V	CIVIL ACTION	PHILADELPHIA PA		—
GARIBAI	LDI, PETER CAMPBELL		Court Name		
		gas service judgment	Number Street		On appeal
Case num	ber 140430195	-			Concluded
			City	State ZIP Code	
Case title		Nature of the case	Court or agency	St	atus of the case
PNC VS	DEBTOR	FORECLOSE DISCONTINUED	O		—
		SETTLED AND ENDED 3-16-11	Court Name		
			Number Street		On appeal
Case number <u>110200901</u>		-			Concluded
			City	State ZIP Code	_
Case title		Nature of the case	Court or agency	St	atus of the case
CITY OF	PHILA VS GARIBALDI	REAL ESTATE TAX LIEN	PHILADELPHIA, PA		- Donding
ET AL			Court Name		— Pending
			Number Street		On appeal
Case number 1312T0148			Number Officer		☐ Concluded
		-			_
			City	State ZIP Code	
seize	in 1 year before you filed for the control of the c	or bankruptcy, was any of your property details below.	repossessed, foreclosed	, garnished, attache	ed,
كا	No. Go to line 11. /es. Fill in the information be	elow			
ш.		-·			

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Deb	otor 1	Troy Thom	ıpson				_ Case number	(if known)	18-11171	
11.		-	-			creditor, including ent because you c	g a bank or financia owed a debt?	ıl institutio	on, set off any	,
	✓ No ☐ Yes	. Fill in the d	etails.							
12.		-	-		ptcy, was any o ustodian, or and		n the possession of	an assign	ee for the be	nefit of
	✓ No ☐ Yes									
P	art 5:	List Cert	tain G	ifts and Co	ntributions					
13.	Within 2	years before	re you f	filed for bankr	uptcy, did you g	give any gifts with	a total value of mo	ore than \$6	300 per perso	n?
	✓ No ☐ Yes	. Fill in the d	etails fo	or each gift.						
14.	Within 2 to any c	-	re you t	filed for bankr	uptcy, did you g	give any gifts or c	ontributions with a	total value	e of more tha	n \$600
	✓ No ☐ Yes	. Fill in the d	etails fo	or each gift or c	ontribution.					
P	art 6:	List Cert	tain L	osses						
15.		year before saster, or ga	-		ptcy or since yo	ou filed for bankru	uptcy, did you lose	anything l	pecause of th	eft, fire,
	✓ No ☐ Yes	. Fill in the d	etails.							
P	art 7:	List Cert	ain P	ayments or	Transfers					
16.	anyone	you consult	ed abo	out seeking bar	nkruptcy or prep	paring a bankrupt	ng on your behalf p tcy petition? ncies for services red	-		•
	□ No ☑ Yes	. Fill in the d	etails.							
	oik and C	Cataldo, P.C	<u>). </u>		Description at Retainer & C		roperty transferred		e payment ansfer was e	Amount of payment
	1500 Walnut Street			_			0	2/22/2018	\$1,500.00	
	nber Stre i te 900	eet								
Sui	16 900				-					
Phi City	ladelphi	а	PA State	19102 ZIP Code	-					
	oc@ccpo ail or website	claw.com e address			-					
Pers	on Who M	ade the Payme	nt, if Not	You	-					

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Deb	tor 1	Troy Thompson	Case number (if known)	
17.		1 year before you filed for bankruptcy, did you or anyone else acting o who promised to help you deal with your creditors or to make paymen		
	Do not	include any payment or transfer that you listed on line 16.		
	✓ No ☐ Yes	s. Fill in the details.		
18.		2 years before you filed for bankruptcy, did you sell, trade, or otherwis ty transferred in the ordinary course of your business or financial affai		
		both outright transfers and transfers made as security (such as granting of include gifts and transfers that you have already listed on this statement.	f a security interest or mortgage on your property).	
	✓ No	s. Fill in the details.		
19.		10 years before you filed for bankruptcy, did you transfer any property a beneficiary? (These are often called asset-protection devices.)	y to a self-settled trust or similar device of which	
	✓ No	s. Fill in the details.		
Pa	art 8:	List Certain Financial Accounts, Instruments, Safe Depo	osit Boxes, and Storage Units	
20.		1 year before you filed for bankruptcy, were any financial accounts or closed, sold, moved, or transferred?	instruments held in your name, or for your	
		checking, savings, money market, or other financial accounts; certificates of pension funds, cooperatives, associations, and other financial institutions.	•	
	✓ No ☐ Yes	s. Fill in the details.		
21.	-	now have, or did you have within 1 year before you filed for bankruptourities, cash, or other valuables?	cy, any safe deposit box or other depository	
	✓ No	s. Fill in the details.		
22.	-	ou stored property in a storage unit or place other than your home with	hin 1 year before you filed for bankruptcy?	
	✓ No	s. Fill in the details.		
Pa	art 9:	Identify Property You Hold or Control for Someone Else	e	_
23.	•	hold or control any property that someone else owns? Include any prin trust for someone.	roperty you borrowed from, are storing for,	
	✓ No ☐ Yes	s. Fill in the details.		

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Deb	tor 1	Troy Thompson	Case r	number (if known)	18-11171
Pa	art 10:	Give Details About Environmental Info	rmation		
For	the purp	ose of Part 10, the following definitions apply:			
ŀ	nazardou	nental law means any federal, state, or local statu s or toxic substance, wastes, or material into the statutes or regulations controlling the cleanup o	air, land, soil, surface water	r, groundwater, or	
		ns any location, facility, or property as defined ur or used to own, operate, or utilize it, including dis	•	whether you now	own, operate, or
		<i>is material</i> means anything an environmental law e, hazardous material, pollutant, contaminant, or		ste, hazardous suk	ostance, toxic
Rep	ort all no	otices, releases, and proceedings that you know a	bout, regardless of when th	ey occurred.	
24.	Has any law?	governmental unit notified you that you may be	iable or potentially liable un	nder or in violation	of an environmental
	✓ No ☐ Yes	. Fill in the details.			
25.		ou notified any governmental unit of any release o	f hazardous material?		
	✓ No ☐ Yes	Fill in the details.			
26.	Have you	ou been a party in any judicial or administrative p	oceeding under any enviror	nmental law? Inclu	ude settlements and
	✓ No ☐ Yes	. Fill in the details.			
Pa	art 11:	Give Details About Your Business or C	onnections to Any Bus	siness	
27.	Within 4	years before you filed for bankruptcy, did you o	vn a business or have any o	of the following co	nnections to any
		A sole proprietor or self-employed in a trade, profest A member of a limited liability company (LLC) or liming A partner in a partnership An officer, director, or managing executive of a corpan owner of at least 5% of the voting or equity secutive.	ited liability partnership (LLP) poration		
		None of the above applies. Go to Part 12. Check all that apply above and fill in the details be	ow for each business.		
28.		years before you filed for bankruptcy, did you gicial institutions, creditors, or other parties.	ve a financial statement to a	anyone about your	business? Include
	□ No □ Yes	. Fill in the details below.			

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Debtor 1	Troy Thompson		Case number (if known)	18-11171		
Part 12	Sign Below					
that answer	ers are true and correct. I unde	of of Financial Affairs and any attachments of Financial Affairs and any attachment, or stand that making a false statement, or notice of the fines up to display the fines up	concealing property, or obta	ining money or		
X /s/ Tro	y Thompson	X				
Troy Th	nompson, Debtor 1	Signature of Debtor 2	Signature of Debtor 2			
Date _	02/23/2018	Date	_			
Did you at	tach additional pages to Your S	Statement of Financial Affairs for Indivi	duals Filing for Bankruptcy	(Official Form 107)?		
☑ No						
Yes						
Did you pa	ay or agree to pay someone who	o is not an attorney to help you fill out	bankruptcy forms?			
√ No						
	Name of person			otcy Petition Preparer's Notice,		
			Declaration, and Si	gnature (Official Form 119).		

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF PENNSYLVANIA PHILADELPHIA DIVISION

In	re Troy Thompson	Case No. 18-11171	
		Chapter	13
	DISCLOSURE OF COMPENSATION OF ATTORN	NEY FOR	DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the a that compensation paid to me within one year before the filing of the petition in bar services rendered or to be rendered on behalf of the debtor(s) in contemplation of is as follows:	nkruptcy, or a	agreed to be paid to me, for
	For legal services, I have agreed to accept	\$5	5,000.00
	Prior to the filing of this statement I have received	\$1	1,500.00
	Balance Due	\$3	3,500.00
2.	. The source of the compensation paid to me was: ☑ Debtor ☐ Other (specify)		
3.	. The source of compensation to be paid to me is:		
	✓ Debtor		
4.	I have not agreed to share the above-disclosed compensation with any other associates of my law firm.	person unle	ss they are members and
	☐ I have agreed to share the above-disclosed compensation with another personassociates of my law firm. A copy of the agreement, together with a list of the compensation, is attached.		
5.	. In return for the above-disclosed fee, I have agreed to render legal service for all a	aspects of th	e bankruptcy case, including:
	a. Analysis of the debtor's financial situation, and rendering advice to the debtor in bankruptcy;	n determinin	g whether to file a petition in
	b. Preparation and filing of any petition, schedules, statements of affairs and plan	which may b	pe required;
	c. Representation of the debtor at the meeting of creditors and confirmation hearing	ng, and any	adjourned hearings thereof;

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B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Continued Meeting of Creditor Hearings, Addition of Creditors after Filing Petition, Motions to Avoid Liens, Motions for Relief from the Automatic Stay, Motions to Dismiss Case, Adverserial Proceedings & Discharge Litigation, Depositions, Asset Cramdowns, Objection to Proof of Claims, Certification of Stipulation Defaults, Motions for Plan Modifications, Motions for Reconsideration, Vacate Wage Orders, Praceipe for Discharge, Bankruptcy Chapter Conversions, Redemption of Property, Lexis & Pacer Research, Credit, Property, Judgements, & Liens Reports. The above legal services will be billed at a hourly rate of \$350/hour per attorney.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

02/23/2018 /s/ Michael A. Cibik, Esquire

Date

Michael A. Cibik, Esquire Cibik & Cataldo, P.C. 1500 Walnut Street, Suite 900 Philadelphia, PA 19102

Phone: (215) 735-1060 / Fax: (215) 735-6769

Bar No.

/s/ Troy Thompson	
Troy Thompson	